

**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**May 03, 2006 8:00 am**  
**Secretary of State**

05-03-2006 90218 050 \*\*\*150.00

**DOCUMENT # P02000128369**

1. Entity Name  
PANACEA PUBLISHING, INC.



Principal Place of Business

401-B YELVINGTON AVE.  
CLEARWATER, FL 33755

Mailing Address

6325 JACQUELINE ARBOR DR.  
TEMPLE TERRACE, FL 33617

**DO NOT WRITE IN THIS SPACE**



03192006 No Chg-P CR2E034 (11/05)

4. FEI Number  
13-4227849

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

DRUMMOND, TEMPLE H  
6325 JACQUELINE ARBOR DR.  
TEMPLE TERRACE, FL 33617

320 West bears Ave.  
Tampa, FL 33613

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IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

*Temple H. Drummond, Temple H. Drummond*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when registering)

4/20/06  
DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE	D
NAME	BRADHAM, CAROLYN
STREET ADDRESS	401-B YELVINGTON AVE.
CITY-ST-ZIP	CLEARWATER, FL 33755
TITLE	D
NAME	JOHNSON, ALFREDDIE
STREET ADDRESS	401-B YELVINGTON AVE.
CITY-ST-ZIP	CLEARWATER, FL 33755
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:**

*CAROLYN BRADHAM*  
*Carolyn Bradham*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-27-06

Date

727-447-4200

Daytime Phone #